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TriService Nursing Research Program Final Report Cover Page

Sponsoring Institution

TriService Nursing Research Program

Address of Sponsoring Institution

4301 Jones Bridge Road
Bethesda MD 20814

USU Grant Number HU0001-14-1-TS10

USU Project Number N14-P15

Title of Research Study or Evidence-Based Practice
(EBP) Project Impact of embedded military
metal alloys on skeletal physiology in an animal
model

Period of Award 09/01/14 – 8/31/16

Applicant Organization Henry Jackson Foundation

Address of Applicant Organization

Principal Investigator (PI) Military Contact Information

Duty Title

Address

Telephone

Mobile Telephone

E-mail Address

PI Home Contact Information

Address

Telephone

Mobile Telephone

E-mail Address

Signatures

PI Signature



Date

1/30/17

Mentor Signature (if applicable)

Date

Abstract

Purpose: The purpose of this study is to determine if differences exist across measures of bone serum biomarkers, computed tomography, biomechanical testing and histomorphometry in bone of skeletally mature rats embedded with tungsten/nickel/cobalt (WNiCo), tungsten/nickel/iron (WNiFe) and depleted uranium (DU) compared to Tantalum (Ta) control.

Design: An experimental design was used consisting of 3 experimental groups and one control group. Time points of 1 and 3 months were used and a minimum of 8 animals were euthanized at each time point.

Methods: Animals were surgically implanted with a total of 4 pellets, 2 in each gastrocnemius muscle. After euthanasia, whole blood, serum, and the long bones of the hindquarters were extracted to be used for analysis. Skeletal tissue was analyzed on the whole organ, tissue and cellular level.

Sample: 74 skeletally mature (aged 60-months) Sprague-Dawley rats

Analysis: Results were analyzed using descriptive statistics and one-way analysis of variance. All results were completed on Prism (GraphPad) version 6. Statistical significance was set at $p < 0.05$. Tissue level results, correction for body weight was completed to account for additional load bearing by heavier animals.

Findings: Measures at the organ level (serum biomarkers) demonstrated no significant differences however tissue level measures (μ CT, pQCT) had significantly increased measures of cancellous bone mineral density and bone mineral concentration as well as cortical bone mineral density in both the WNiCo and DU groups at 3 months. Despite these changes, no change in the physical strength was identified through biomechanical testing.

Implications for Military Nursing: Military nurses are in the unique position to both advocate and educate for any patients who identify themselves as having embedded fragments. Many of these patients will have fragments come out of their skin through natural migration and very little is known about what to do when this happens. Rapid identification of the alloy can be completed and the patient will be followed by systems that are in place through the Veteran's Affairs medical system. Only military nurses understand that embedded metal has become a "normal" finding on many patients who have been in proximity to improvised explosive devices.

TSNRP Research Priorities that Study or Project Addresses**Primary Priority** Identify the primary research priority addressed in the study or project.

Force Health Protection:	<input type="checkbox"/> Fit and ready force <input type="checkbox"/> Deploy with and care for the warrior <input checked="" type="checkbox"/> Care for all entrusted to our care
Nursing Competencies and Practice:	<input type="checkbox"/> Patient outcomes <input type="checkbox"/> Quality and safety <input type="checkbox"/> Translate research into practice/evidence-based practice <input type="checkbox"/> Clinical excellence <input type="checkbox"/> Knowledge management <input type="checkbox"/> Education and training
Leadership, Ethics, and Mentoring:	<input type="checkbox"/> Health policy <input type="checkbox"/> Recruitment and retention <input type="checkbox"/> Preparing tomorrow's leaders <input type="checkbox"/> Care of the caregiver
Other: (specify)	<input type="checkbox"/>

Secondary Priority (if applicable; otherwise delete the words "Secondary Priority" and the duplicate table below)

Force Health Protection:	<input type="checkbox"/> Fit and ready force <input type="checkbox"/> Deploy with and care for the warrior <input type="checkbox"/> Care for all entrusted to our care
Nursing Competencies and Practice:	<input type="checkbox"/> Patient outcomes <input type="checkbox"/> Quality and safety <input type="checkbox"/> Translate research into practice/evidence-based practice <input type="checkbox"/> Clinical excellence <input type="checkbox"/> Knowledge management <input type="checkbox"/> Education and training
Leadership, Ethics, and Mentoring:	<input checked="" type="checkbox"/> Health policy <input type="checkbox"/> Recruitment and retention <input type="checkbox"/> Preparing tomorrow's leaders <input type="checkbox"/> Care of the caregiver
Other: (specify)	<input type="checkbox"/>

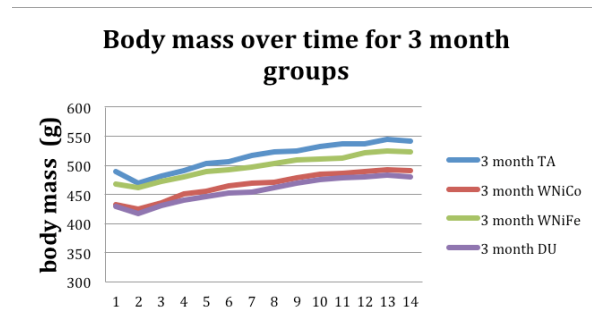
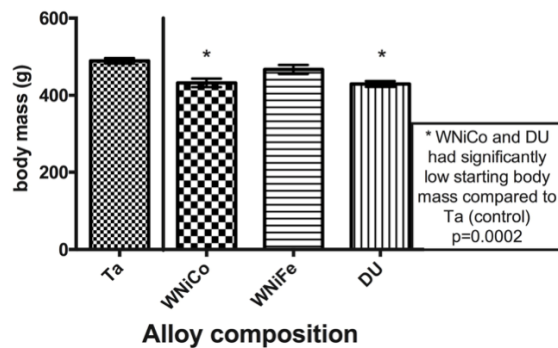
Progress Towards Achievement of Specific Aims of the Study or Project

Findings related to each specific aim, research or study questions, and/or hypothesis:

The specific aim of this project is to determine if differences exist across measures of bone serum biomarkers, computed tomography, biomechanical testing and histomorphometry in bone of skeletally mature rats embedded with WNiCo, WNiFe and DU compared to Ta (control).

Animal Weights

Animals were weighed upon arrival to the animal facility, prior to euthanasia and, at a minimum, weekly. Body mass was recorded along with body temperatures as a means of evaluating the health of each animal. A loss of 5% body mass in a week, not preceded by surgical intervention, would trigger further health evaluation by the primary investigator and the veterinarian. Body mass for 1-month group showed no significant mass differences between groups compared to control at either the arrival to the facility or prior to euthanasia (Figure 2, 3, 4). Additionally, no significant differences exist between any groups. Body weights in the WNiCo and DU groups were significantly lower upon arrival as well as at euthanasia ($p < 0.0002$). The increase in body weights for each group remained consistent throughout the study (Figure 5, 6, 7). The percent change over time for Ta (control) in the 3-month group is 11%, while WNiCo, WNiFe, and DU are 14%, 12% and 12% respectively.



Pellet mass

Each metal pellet was weighed prior to insertion as well as following extraction. Prior to weighing each pellet after euthanasia, they were soaked in 70% ethanol to ease the removal of any tissue that may have adhered to the pellet during the implantation period. The only pellet that had a significant weight change over time was in both the 1-month and 3-month DU groups (13.4% and 17.1% respectively). All other pellets decreased in mass by 3.5%-6.6%.

Hematology

Hematology analysis was performed on the day of euthanasia. Controls were completed and no sample was evaluated until results of controls were within normal limits.

Complete blood counts (CBC) were completed consisting of white blood cells (WBC), red blood cells (RBC), hemoglobin (HGB), hematocrit (HCT) and platelet count (PLT). Each sample was evaluated twice to ensure accuracy and decrease the risk of a sampling error. If differences were minimal, less than 10%, then the first sets of results were used. If any 2 results differed by greater than 10%, then a total of 3 evaluations were completed, the two most consistent results were kept and averages between the groups were used as the results.

No significant differences are observed between any experimental groups at the one-month time point and control on measures of CBC. Among the 3-month groups, platelet count is significantly lower in WNiFe compared to control ($p=0.0285$). Though the platelet count was statistically significant between the WNiFe and Ta groups, these results have no clinical significance and do not reflect thrombocytopenia. No other significant differences seen on CBC at 3 months.

Serum Biomarkers

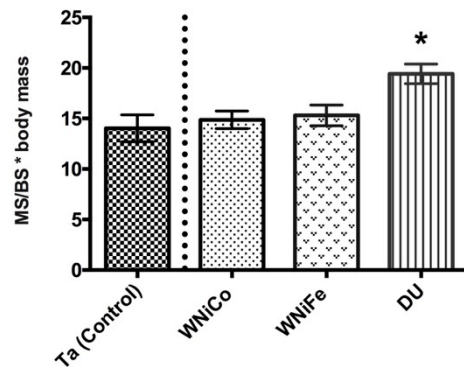
Serum markers of bone turnover were completed and statistical comparison performed for each time point. Each ELISA was performed according to the instructions within each kit. The first two osteocalcin kits yielded no results for either controls or samples. Additional kits were ordered yielding results consistent with expectations for controls. Results of osteocalcin ELISA were evaluated and any results with a coefficient of variation greater than 25% were omitted from analysis. Results for 1-month time point resulted in no significant changes between any groups on measures of osteocalcin (Figure 7). The 3-month time point group demonstrates significantly lower osteocalcin between WNiCo and DU, however, no experimental groups differed from control.

Results of TRAP5b ELISA were evaluated and any results with a coefficient of variation greater than 25% were omitted from analysis. Measures of TRAP5b reveal no significant differences at both the 1 and 3-month timepoints.

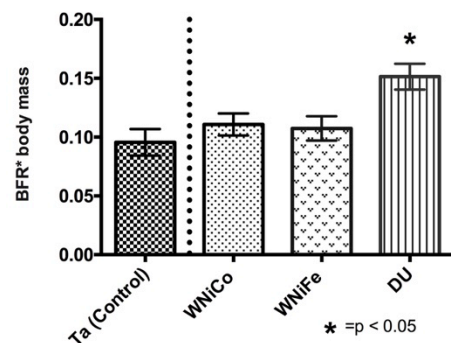
Histomorphometry

Histomorphometry was completed utilizing ultraviolet light in order to visualize the fluorochrome label, calcein. The evaluation was completed using Osteomeasure with 10% of samples being evaluated twice in order to ensure consistency of this subjective measure. Results for mineralized surface/bone surface (MS/BS), mineral apposition rate (MAR), and bone formation rate (BFR) were completed and analyzed.

No statistically significant differences were noted on measures MAR between any experimental groups and control. Depleted uranium shows a significantly increase in MS/BS at 3 months.

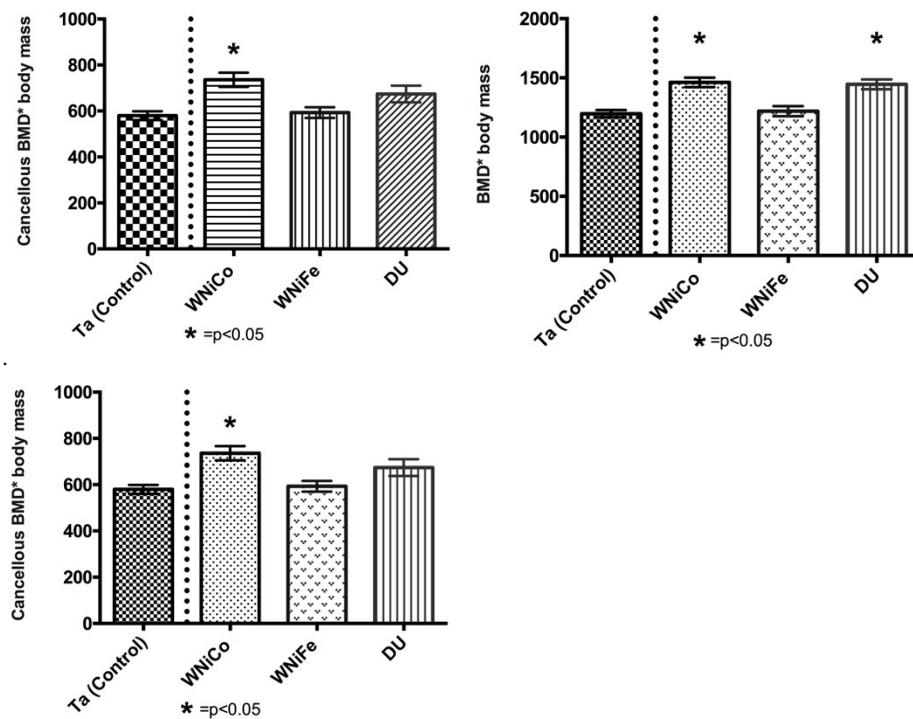


On measures of BFR, no statistically significant differences exist at the 1-month time point between the experimental groups and control. However, at the 3-month time point, BFR is significantly increased in the DU by 43% over control ($p=0.0296$).



Peripheral quantified computed tomography

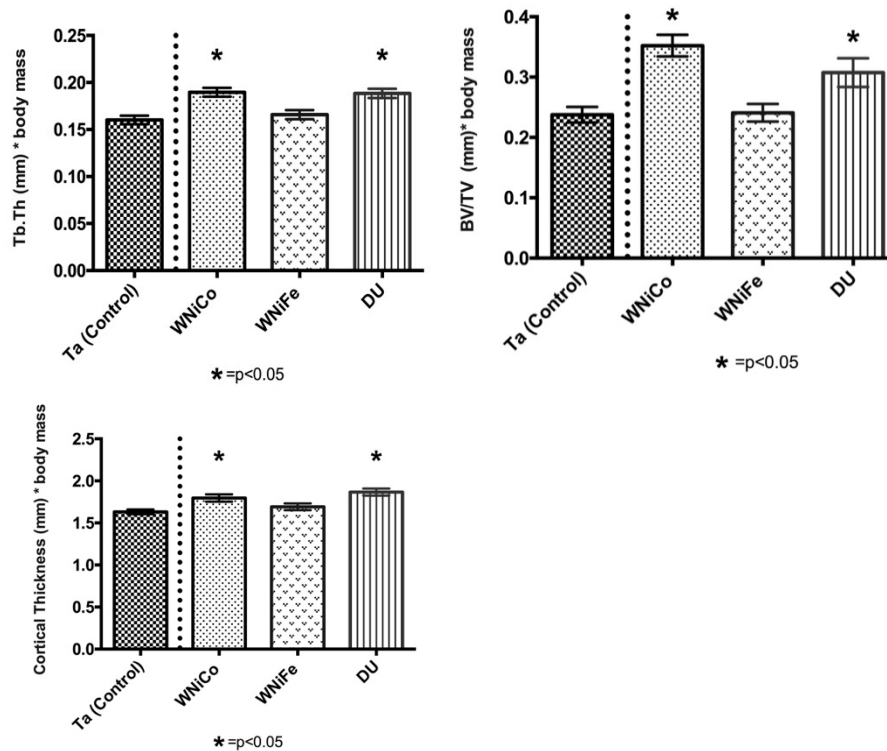
Bone mineral density and bone mineral concentration for the trabecular compartment of the distal femur are not significantly different than control at either the 1-month or 3-month time point. On the measure of bone mineral density, while no differences are seen at the 1-month time point, the WNiCo group shows statistically significant ($p=0.0163$) greater bone mineral density over control. WNiCo and DU have significantly increased total vBMD and WNiCo has increase cancellous BMD compared to control at 3 months



Mid-shaft femur pQCT scans revealed no statistically significant results on cortical thickness at either 1-month or 3-month time points.

Micro computed tomography

Each tibia was x-rayed in order to measure the total length of the bone to be scanned. The range of the total length of each tibia was from 38-44mm. No significant differences were seen on any trabecular measurements at either the 1-month or 3-month time point on measures of trabecular thickness, trabecular spacing, or trabecular number. Cortical thickness measurements at 1-month were not statistically significant however, in the 3-month group, the WNiCo group is significantly increased on the measure of cortical thickness compared to control ($p=0.0015$). WNiCo and DU groups have significantly increased Bone Volume/ Total Volume at 3 months



Biomechanical Testing

Biomechanical testing included cross-sectional moment of inertia, elastic modulus, ultimate stress and energy to yield. No statistically significant differences are seen in either the 1-month or 3-month time points between any of the experimental metal groups and control (Table 16-22). These results indicate that no difference exists between groups implanted with military metal alloys and control when the physical strength of the bone is measured. Regardless of increased cortical bone seen on uCT in the 3-month WNiCo group, no change in strength is present.

Relationship of current findings to previous findings: Previous work in this area suggested that bone loss would occur in the animals implanted with WNiCo and DU. The previous studies utilized the same species of animals and the identical composition of metal, however the animals were not skeletally mature and the theory of bone loss was not substantiated by measure at different levels of organ physiology. Additional studies that examined the effect of these metals on local tissue determined that immediate genotoxic changes occur after implantation and that the formation of metastatic cancer occurs in rats with WNiCo in a very short timeframe. The current findings show that instead of bone loss, there is a relative increase in bone at both the cancellous and cortical levels. This is significant because it is the first time metal has demonstrated bone growth across multiple measures of bone physiology.

Effect of problems or obstacles on the results: No problems or obstacles were encountered during this study that had any effect on the results

Limitations: The greatest limitations to this study are the short time periods of 1 and 3 months as well as the low dose utilized for implantation. With greater time and funding, a lifetime study evaluating varying doses of metals implanted may elucidate on whether the metals are the cause of the changes or if, in fact the immune response plays a role in these changes

Conclusion: The presence of military metal alloys, specifically WNiCo and DU appear to have at least an early effect on bone after 3 months. A greater amount of bone is seen in these groups on measures specific to cancellous and cortical bone which is contrary to previous theories.

Significance of Study or Project Results to Military Nursing

This study demonstrates that, what was once thought of as inert fragments may have an impact on the skeletal health of our service members. Military nurses have the unique position to care for those involved in improvised explosive devices, which often result in embedded fragments being maintained in the body of many of these individuals. These fragments remain in place due to clinical practice guidelines that date back to the civil war. Previous work has demonstrated that cancer can result from these metals. Specific to bone, no known work has been done with these metals up to this date. This study clearly shows that there is an effect by three months on bone from WNiCo and DU. Due to the anabolic effects of cancer and what appears to be bone growth, and increase in bone formation may be detrimental to skeletal health of these individuals.

Changes in Clinical Practice, Leadership, Management, Education, Policy, and/or Military Doctrine that Resulted from Study or Project

Policy implications for this study are currently in place and the VA medical system has already begun to examine the bone density of veterans with known DU exposure. From a clinical practice standpoint, all metals that have been removed from a service member should be evaluated at the Joint Pathology Lab for metal composition. Educating patients and clinicians on the potential impact of this study and the known literature will help change the culture from one of a “war trophy” that was embedded to a potentially toxic substance. This represents a change in mindset across all of DOD and VA, and possibly across all healthcare following the domestic terror events that leave Americans with similar patterns of injury. Though no change has occurred in military doctrine, this study helps solidify that current policy is accurate and should be followed.

REFERENCES

1. ALPCO. 2013. *Rat Osteocalcin ELISA*. <http://www.alpco.com/default.aspx?a=pdetail&pid=3412>
2. Arsenault AL, Hunziker EB. 1988. Electron microscopic analysis of mineral deposits in the calcifying epiphyseal growth plate. *Calcified tissue international* 42:119-26
3. Bourgeois D, Burt-Pichat B, Le Goff X, Garrevoet J, Tack P, et al. 2015. Micro-distribution of uranium in bone after contamination: new insight into its mechanism of accumulation into bone tissue. *Anal Bioanal Chem* 407:6619-25
4. Boyle WJ, Simonet WS, Lacey DL. 2003. Osteoclast differentiation and activation. *Nature* 423:337-42
5. Clark JA, Jr., Myers PH, Goelz MF, Thigpen JE, Forsythe DB. 1997. Pica behavior associated with buprenorphine administration in the rat. *Lab Anim Sci* 47:300-3
6. Engelke K, Gluer CC. 2006. Quality and performance measures in bone densitometry: part 1: errors and diagnosis. *Osteoporos Int* 17:1283-92
7. Frisch BJ, Porter RL, Calvi LM. 2008. Hematopoietic niche and bone meet. *Curr Opin Support Palliat Care* 2:211-7
8. Frost HM. 1994. Wolff's Law and bone's structural adaptations to mechanical usage: an overview for clinicians. *Angle Orthod* 64:175-88
9. Furlow B. 2005. Alternative to depleted uranium is carcinogenic in rats. *Lancet Oncology* 6:198
10. Guilbert C, Kelly AD, Petrucci LA, Lemaire M, Mann KK. 2011. Exposure to tungsten induces DNA damage and apoptosis in developing B lymphocytes. *Leukemia : official journal of the Leukemia Society of America, Leukemia Research Fund, U.K* 25:1900-4
11. Halleen JM, Tiitinen SL, Ylipahkala H, Fagerlund KM, Vaananen HK. 2006. Tartrate-resistant acid phosphatase 5b (TRACP 5b) as a marker of bone resorption. *Clinical laboratory* 52:499-509
12. Hodge SJ, Ejnik J, Squibb KS, McDiarmid MA, Morris ER, et al. 2001. Detection of depleted uranium in biological samples from Gulf War veterans. *Military medicine* 166:69-70
13. Kalinich JF, Emond CA, Dalton TK, Mog SR, Coleman GD, et al. 2005. Embedded Weapons-Grade Tungsten Alloy Shrapnel Rapidly Induces Metastatic High-Grade Rhabdomyosarcomas in F344 Rats. *Environmental Health Perspectives* 113:729-34
14. Kalinich JF, Vane EA, Centeno JA, Gaitens JM, Squibb KS, et al. 2014. Chapter 4 embedded metal fragments. *Annu Rev Nurs Res* 32:63-78
15. Kanis JA, Oden A, Johnell O, De Laet C, Jonsson B, Oglesby AK. 2003. The components of excess mortality after hip fracture. *Bone* 32:468-73
16. Karlstrom E, Ek-Rylander B, Wendel M, Andersson G. 2010. RANKL induces components of the extrinsic coagulation pathway in osteoclasts. *Biochemical and biophysical research communications* 394:593-9
17. Karsenty G. 2006. Convergence between bone and energy homeostases: leptin regulation of bone mass. *Cell Metab* 4:341-8
18. Karsenty G, Oury F. 2014. Regulation of male fertility by the bone-derived hormone osteocalcin. *Mol Cell Endocrinol* 382:521-6

19. Khadilkar AV, Mandlik RM. 2015. Epidemiology and treatment of osteoporosis in women: an Indian perspective. *Int J Womens Health* 7:841-50
20. Klotzbuecher CM, Ross PD, Landsman PB, Abbott TA, 3rd, Berger M. 2000. Patients with prior fractures have an increased risk of future fractures: a summary of the literature and statistical synthesis. *Journal of Bone and Mineral Research* 15:721-39
21. Lee NK, Sowa H, Hinoi E, Ferron M, Ahn JD, et al. 2007. Endocrine regulation of energy metabolism by the skeleton. *Cell* 130:456-69
22. Leggett RW. 1997. A model of the distribution and retention of tungsten in the human body. *The Science of the total environment* 206:147-65
23. Li X, Yuan FL, Lu WG, Zhao YQ, Li CW, et al. 2010. The role of interleukin-17 in mediating joint destruction in rheumatoid arthritis. *Biochemical and biophysical research communications* 397:131-5
24. Lymperi S, Ersek A, Ferraro F, Dazzi F, Horwood NJ. 2011. Inhibition of osteoclast function reduces hematopoietic stem cell numbers in vivo. *Blood* 117:1540-9
25. Mansour A, Abou-Ezzi G, Sitnicka E, Jacobsen SE, Wakkach A, Blin-Wakkach C. 2012. Osteoclasts promote the formation of hematopoietic stem cell niches in the bone marrow. *J Exp Med* 209:537-49
26. McClain DE, Benson KA, Dalton TK, Ejnik J, Emond CA, et al. 2001. Biological effects of embedded depleted uranium (DU): summary of armed forces radiobiology research institute research. *The Science of the total environment* 274:115-8
27. McDiarmid MA, Engelhardt SM, Dorsey CD, Oliver M, Gucer P, et al. 2011. Longitudinal health surveillance in a cohort of Gulf War veterans 18 years after first exposure to depleted uranium. *J Toxicol Environ Health A* 74:678-91
28. McDiarmid MA, Gaitens J, Squibb KS. 2012. Depleted Uranium (DU) and Toxic Embedded Fragments.
29. McDiarmid MA, Gaitens JM, Hines S, Breyer R, Wong-You-Cheong JJ, et al. 2013. The Gulf War depleted uranium cohort at 20 years: bioassay results and novel approaches to fragment surveillance. *Health Phys* 104:347-61
30. McDiarmid MA, Keogh JP, Hooper FJ, McPhaul K, Squibb K, et al. 2000. Health effects of depleted uranium on exposed Gulf War veterans. *Environmental research* 82:168-80
31. McDonald JD, Weber WM, Marr R, Kracko D, Khain H, Arimoto R. 2007. Disposition and clearance of tungsten after single-dose oral and intravenous exposure in rodents. *Journal of Toxicology and Environmental Health - Part A: Current Issues* 70:829-36
32. Miller AC, Blakely WF, Livengood D, Whittaker T, Xu J, et al. 1998. Transformation of human osteoblast cells to the tumorigenic phenotype by depleted uranium-uranyl chloride. *Environmental Health Perspectives* 106:465-71
33. Miller AC, Bonait-Pellie C, Merlot RF, Michel J, Stewart M, Lison PD. 2005. Leukemic transformation of hematopoietic cells in mice internally exposed to depleted uranium. *Molecular and cellular biochemistry* 279:97-104
34. Miller AC, Mog S, McKinney L, Lei L, Allen J, et al. 2001. Neoplastic transformation of human osteoblast cells to the tumorigenic phenotype by heavy metal-tungsten alloy particles: induction of genotoxic effects. *Carcinogenesis* 22:115-25
35. Miller AC, Stewart M, Rivas R. 2009. DNA methylation during depleted uranium-induced leukemia. *Biochimie* 91:1328-30
36. Miller AC, Xu J, Stewart M, Prasanna PG, Page N. 2002. Potential late health effects of depleted uranium and tungsten used in armor-piercing munitions: comparison of

- neoplastic transformation and genotoxicity with the known carcinogen nickel. *Military medicine* 167:120-2
37. Nenonen A, Cheng S, Ivaska KK, Alatalo SL, Lehtimäki T, et al. 2005. Serum TRACP 5b is a useful marker for monitoring alendronate treatment: comparison with other markers of bone turnover. *Journal of bone and mineral research : the official journal of the American Society for Bone and Mineral Research* 20:1804-12
 38. Parfitt AM. 1995. Bone remodeling, normal and abnormal: a biological basis for the understanding of cancer-related bone disease and its treatment. *Can J Oncol* 5 Suppl 1:1-10
 39. Pellmar TC, Fuciarelli AF, Etnik JW, Hamilton M, Hogan J, et al. 1999. Distribution of uranium in rats implanted with depleted uranium pellets. *Toxicological Sciences* 49:29-39
 40. Pittenger MF, Mackay AM, Beck SC, Jaiswal RK, Douglas R, et al. 1999. Multilineage potential of adult human mesenchymal stem cells. *Science* 284:143-7
 41. Porter RL, Calvi LM. 2008. Communications between bone cells and hematopoietic stem cells. *Arch Biochem Biophys* 473:193-200
 42. Rubin J, Murphy TC, Fan X, Goldschmidt M, Taylor WR. 2002. Activation of extracellular signal-regulated kinase is involved in mechanical strain inhibition of RANKL expression in bone stromal cells. *Journal of bone and mineral research : the official journal of the American Society for Bone and Mineral Research* 17:1452-60
 43. Schaffler MB, Cheung WY, Majeska R, Kennedy O. 2014. Osteocytes: master orchestrators of bone. *Calcified tissue international* 94:5-24
 44. Schuster BE, Roszell LE, Murr LE, Ramirez DA, Demaree JD, et al. 2012. In vivo corrosion, tumor outcome, and microarray gene expression for two types of muscle-implanted tungsten alloys. *Toxicology Applied Pharmacology* 265:128-38
 45. Sun TC, Mori S, Roper J, Brown C, Hooser T, Burr DB. 1992. Do different fluorochrome labels give equivalent histomorphometric information? *Bone* 13:443-6
 46. Taichman RS. 2005. Blood and bone: two tissues whose fates are intertwined to create the hematopoietic stem-cell niche. *Blood* 105:2631-9
 47. Teitelbaum SL. 2000. Bone resorption by osteoclasts. *Science* 289:1504-8
 48. Willson T, Nelson SD, Newbold J, Nelson RE, LaFleur J. 2015. The clinical epidemiology of male osteoporosis: a review of the recent literature. *Clin Epidemiol* 7:65-76
 49. Yang Z, Li L, Shi Z-j, Wang J, Li Z-h. 2013. Porous tantalum rod implant is an effective and safe choice for early-stage femoral head necrosis: a meta-analysis of clinical trials. *European Journal of Orthopaedic Surgery and Traumatology* 23:211-7

References Cited Summary of Dissemination

Type of Dissemination	Citation	Date and Source of Approval for Public Release
Publications (using a consistent reference style, provide complete citation for papers already published in print or electronic journals)		
Publications in Press (using a consistent reference style, provide partial citation for papers accepted for publication but not yet published in print or electronic journals; if known, provide estimated date paper will be published)		
Published Abstracts (using a consistent reference style, provide complete citation for abstracts published in print or electronic journals)		
Podium Presentations (using a consistent style, provide author(s), title of presentation, conference name, conference location, date of presentation, sponsoring agency or organization)		
Poster Presentations (using a consistent style, provide author(s), title of		

poster, conference name, conference location, date of presentation, sponsoring agency or organization)		
Media Reports (provide details such as title, type of media [e.g., press release, newspaper article, television or radio story, internet post], date of report)		
Other		

Reportable Outcomes

Carefully document reportable outcomes; add rows to the appropriate categories as needed

Reportable Outcome	Detailed Description
Applied for Patent (if none, type "none")	
Issued a Patent (if none, type "none")	
Developed a cell line (if none, type "none")	
Developed a tissue or serum repository (if none, type "none")	
Developed a data registry (if none, type "none")	

Recruitment and Retention Aspect	Number
Animals Projected in Grant Application	80
Animals Purchased	80
Model Development Animals	0
Research Animals	80
Animals With Complete Data	75
Animals with Incomplete Data	5

Recruitment and Retention Aspect	Number
Animals Projected in Grant Application	80
Animals Purchased	80
Model Development Animals	0
Animals Intervention Group / Control or Sham Group	60/20
Intervention Group / Control or Sham Group Animals With Complete Data	58/17
Intervention Group / Control or Sham Group Animals With Incomplete Data	2/3

Final Budget Report

TASK BUDGET SUMMARY



Current as of: JAN2017

Organization: HJF-Henry M. Jackson Foundation
 Award #/Name: 64442 - METAL ALLOY IMPACT
 Award Manager: DANCHANKO, WILLIAM
 Award Period: 09/01/2014 to 08/31/2016
 Project #/Name: 307382 - METAL ALLOY IMPACT
 Project Manager: SHEPARD, ALYSSA
 Project Period: 09/01/2014 to 08/31/2016

Task # / Name: 1.00 - TASK 1
 Task Period: 09/01/2014 to 08/31/2016
 Task Manager: DANCHANKO, WILLIAM
 Task Desc: N14-P15
 Award: UNIFORMED SERVICES UNIVERSITY OF THE
 Sponser: HEALTH SCIENCES
 Billing Analyst: DORSEY, TRACEY M.
 Primary Analyst: LIVAN, REYHAN
 Ref Award#: HU0001-14-1-TS10

Current As of	Award/Project/Task Number	Task Budgetary Control	Category Group	Expenditure Category	Budgetary Control	Current Month Expenses	Budget	Open Commitment	Task-To-Date Expenses	Total Funds Used	Balance Available	Percentage Available
01/31/2017	64442 - 307382 - 1.00	Absolute	DIRECT	SUPPLIES	Absolute	0.00	37,416.00	0.00	24,136.65	24,136.65	13,279.35	35.49
				DOMESTIC TRAVEL	Absolute	0.00	2,000.00	0.00	1,206.17	1,206.17	793.83	39.69
				OTHER DIRECT COSTS	Absolute	0.00	2,000.00	0.00	642.70	642.70	1,357.30	67.87
				TOTAL DIRECT :		0.00	41,416.00	0.00	25,985.52	25,985.52	15,430.48	37.26
			INDIRECT	ON-SITE OVERHEAD	Advisory	0.00	15,108.56	0.00	9,426.30	9,426.30	5,682.26	37.61
				COMPANY-WIDE G & A	Advisory	0.00	8,083.02	0.00	5,063.96	5,063.96	3,019.06	37.35
				TOTAL INDIRECT :		0.00	23,191.58	0.00	14,490.26	14,490.26	8,701.32	37.52
				TOTAL TASK :		0.00	64,607.58	0.00	40,475.78	40,475.78	24,131.80	37.35

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14. ABSTRACT

Purpose: The purpose of this study is to determine if differences exists across measures of bone serum biomarkers, computed tomography, biomechanical testing and histomorphometry in bone of skeletally mature rats embedded with tungsten/nickel/cobal (WNiCo), tungsten/nickel/iron (WNiFe) and depleted uranium (DU) compared to Tantalum (Ta) control.

Design: An experimental design was used consisting of 3 experimental groups and one control group. Time points of 1 and 3 months were used and a minimum of 8 animals were euthanized at each time point.

Methods: Animals were surgically implanted with a total of 4 pellets, 2 in each gastrocnemius muscle. After euthanasia, whole blood, serum, and the long bones of the hindquarters were extracted to be used for analysis. Skeletal tissue was analyzed on the whole organ, tissue and cellular level.

Sample: 74 skeletally mature (aged 60-months) Sprague-Dawley rats

Analysis: Results were analyzed using descriptive statistics and one-way analysis of variance. All results were completed on Prism (GraphPad) version 6. Statistical significance was set at $p < 0.05$. Tissue level results, correction for body weight was completed to account for additional load bearing by heavier animals.

Findings: Measures at the organ level (serum biomarkers) demonstrated no significant differences however tissue level measures (μ CT, pQCT) had significantly increase measures of cancellous bone mineral density and bone mineral concentration as well as cortical bone mineral density in both the WNiCo and DU groups at 3 months. Despite these changes, no change in the physical strength were identified through biomechanical testing.

Implications for Military Nursing: Military nurses are in the unique position to both advocate and educate for any patients who identify themselves as having embedded fragments. Many of these patients will have fragments come out of their skin through natural migration and very little is known about what to do when this happens. Rapid identification of the alloy can be completed and the patient will be followed by systems that are in place through the Veteran's Affairs medical system. Only military nurses understand that embedded metal has become a "normal" finding on many patients who have been in proximity to improvised explosive devices.

15. SUBJECT TERMS

Skeletal physiology, Animals, serum biomarkers

16. SECURITY CLASSIFICATION OF:			17. LIMITATION OF ABSTRACT	18. NUMBER OF PAGES	19a. NAME OF RESPONSIBLE PERSON
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